On August 28th 2020, Governor Baker issued Executive Order Number 49, which provides three ways for communities to expand safe, in-person supervision through supplemental care options for families with children enrolled in hybrid or remote learning. One of these allows the Department of Early Education and Care (EEC) to establish a new category of license exemption, Remote Learning Enrichment Programs, which may be issued to entities that are approved by their local municipal authorities. Such approval is contingent upon the program's ability to meet certain minimum requirements, including adherence to the health and safety guidelines set forth by either EEC or the Department of Elementary and Secondary Education (DESE) related to the COVID-19 pandemic.

This Attestation form is required to apply for exemption. It represents the applicant's agreement that they will comply with health and safety guidelines.

## Please read each attestation carefully. Check the box to the left to confirm that you agree to and are able to comply with the requirements and conditions described in each attestation below. Submit this form to the Municipal Approving Authority.

□My program is prepared to follow either DESE or EEC health and safety guidance.

□My program will maintain supplies, resources, and facilities to promote health and safety protocols.

□My program will promote frequent hand hygiene practices and implement all health and safety protocols regarding hand hygiene, cleaning, sanitizing, and disinfecting.

 $\Box$ My program will implement health and safety protocols regarding screening and monitoring of all those in the program space.

 $\Box$ My program has adequate staffing to comply with and implement the requirements included in the health and safety guidance.

□My program will require masks or cloth face coverings of all staff at all times.

□My program will promote physical distancing of at least 6 feet at all times.

□My program will maintain stable groupings of children and staff and keep each discrete group separate.

 $\Box$ My program will prepare a space to be used for the safe and supervised isolation of sick individuals until they are able to leave the premises.

 $\Box$  If my program is unable to comply with any of the health and safety guidance requirements, I will notify the approving Municipality immediately.

I understand that by signing below, I confirm that I am duly authorized to act as the official agent of \_\_\_\_\_\_. I confirm agreement with each attestation above. I further understand that any breach of the provisions of this Attestation Form may result in the possible immediate closure of the Remote Learning Enrichment Program or other action deemed necessary, in its discretion, by EEC or the authorizing municipality.

Signed under the penalties of perjury.

Signature:	Date:
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Title: